

Milwaukee County CCS Program

Meeting Agenda

November 12, 2015

9:00 a.m.

Introductions: Welcome

I. Update On Statements of Deficiency Progress

Jen Wittwer and Jen Alfredson from CARS provided general updates re: the work that has been done to address the deficiencies identified during the state visit in August.

Jen Alfredson addresses deficiency #1- Demonstrating medical record uniformity across all CCS agencies. All charts need to be organized in same manner and demonstrate the utilization of centralized forms identified as Milwaukee County CCS- The CCS Service Directors have been participating in a workgroup every Thursday to develop a chart organization format, all CCS agencies are now using a uniform chart organization, universal Milwaukee County forms and universal the supervision log and training/orientation log. CARS Quality Assurance Department is performing compliance audits at CCS agencies to ensure that the protocols that have been set are being followed.

Jen Wittwer addresses deficiency #2- Redesign our enrollment process to ensure that we are in compliance with DHS 36. We are working in collaboration with the state to address this deficiency and have technical assistance sessions scheduled with the state bi-weekly to address this area. We continue to accept CCS referrals and are assisting individuals with getting enrolled in CCS. CARS staff are reaching out to all consumers that have expressed an interest in CCS to ensure that they have the information they need to make an informed choice about what care coordination agency they would like. Our care coordination agencies continue to work on hiring new staff and developing capacity to take new consumers.

II. Recovery Advisory Committee – this was our 3rd statement of deficiency. Much work has gone into addressing this deficiency since our last RAC meeting.

- a) Consumer Identification- we need to determine a method by which we are going to identify consumers on the RAC sign in sheet. According to DHS 36, the RAC needs to be comprised of 1/3 consumer representation and we need to be able to demonstrate that this is occurring. The RAC Membership subcommittee determined that a**

master list of members with roles will be kept in the front of the RAC attendance binder. For meeting sign in sheets, we will then have a pre-filled list with committee member names without identified roles to avoid stigmatizing. Guests will have a separate sign-in from if they attend RAC meetings. **MOTION** made to approve the aforementioned methodology. **MOTION APPROVED.** We will implement the use of a new sign-in sheet at our next RAC meeting 1/14/16.

- b) Open Meeting vs. Closed Meeting (Discussion Only)- **The RAC Membership Subcommittee** suggests that we have only formal RAC members sit at the table during committee meetings and guests would sit in another area of the room. The subcommittee suggests to wait until a formal committee is established and allow the formal committee make the decision re: utilizing an open vs. closed meeting format. Suggestion made to consider calling a closed meeting and asking guests to step out if there is a discussion that needs to occur with the formal committee in the future. **NO ACTION** taken today. Will establish formal committee before any permanent decisions are made re: this topic.

Committee Size- Subcommittee recommends that the formal RAC committee be made up of 19 individuals with the understanding that the committee could always grow on the consumer side. **MOTION** made to adopt this format. **MOTION APPROVED.**

Suggested Committee Composition:

- 6 individuals would be county staff and providers
- 3-6 individuals would be advocates
- 7-10 consumers and/or family members of individuals receiving CCS services (particularly with the youth population)

c) Recruitment Process

- a. Review Brochure/Application- **RAC** reviews the application and brochure. Application will be available on the CARS website. We will offer peer mentoring for new consumers if they would like support (and add this info to the application).

It was decided by the subcommittee that we need an informational brochure to assist us with recruiting. Feedback

provided re: content of the brochure. Suggested changes will be made. Brochure will be distributed and posted to the website

Next Steps- We would like to have the formal committee developed by January's meeting. The membership subcommittee will review applications and select members. **MOTION MADE TO APPROVE this methodology. MOTION APPROVED**

Membership committee will meet on 1/7/16 to determine formal membership of RAC.

- d) Recruitment-Discussion related to considering including the RAC membership brochure in the CCS Welcome Packet that the consumer driven Provider Directory committee is working on. Will discuss further will the consumers on the Provider Directory committee to see if there would be value in including this brochure in the CCS Consumer Welcome Packet.

RAC also agrees that brochure will be provided to advocates and providers for distribution and recruitment.

III. Reports - BHD

- a) 3rd Quarter Report- 3rd quarter enrollment numbers provided by Jen Alfredson.
- b) Ancillary Network- the CCS Ancillary Provider network is in the final stages of preparation for launching, projected to occur by the end of this month. All CCS providers (including the ancillary network) have been invited to participate in the Jingle Mingle, scheduled for 12/2 from 1:00-3:30 PM at the Italian Community Center, in order to market what they have to offer within CCS. The county is working on developing a CCS New Provider Welcome Packet that will include information that will support new providers in meeting the requirements and expectations related to being a CCS provider.
- c) CCS for Youth Update: The County recently met with Disability Services Division and existing CCS providers (that also provide services for youth) to begin developing a CCS network for children. The goal is to have our first youth enrolled in CCS by January.

- IV. Avatar Update- **Avatar has launched. We have had some issues that are being addressed. Communications will continue to go out to providers re: resolution to these matters.**
- V. Questions and Comments- **Dane County is offering a Cultural Intelligence and Trauma informed Care training. Training information is posted on the CARS CCS website.**
- VI. Adjournment